

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)  
Friends of Bud Cramer

<b>A.</b> Full Name (Last, First, Middle Initial) Zach Space for Congress Committee	<b>Transaction ID:</b> BA584F5EEF81C4D1FBB2 <b>Date of Disbursement</b>
Mailing Address 714 N Wooster Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 7</div> </div>
City State Zip Code Dover OH 44622	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement candidate-OH 18th district	<div> <div>1000.00</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Tim Mahoney for Florida	<b>Transaction ID:</b> BF32E5989F31E4728941 <b>Date of Disbursement</b>
Mailing Address 4114 Northlake Blvd. Suite 300	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 7</div> </div>
City State Zip Code Palm Beach Gardens FL 33410	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement candidate-FL 16th District	<div> <div>1000.00</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Ellsworth for Congress	<b>Transaction ID:</b> B7FF58E785F624125A2D <b>Date of Disbursement</b>
Mailing Address P.O. Box 62	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 7</div> </div>
City State Zip Code Evansville IN 47708	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement candidate-IN 8th district	<div> <div>1000.00</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div> <div>3000.00</div> </div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div> <div></div> </div>